



Vermont Wing Headquarters
Civil Air Patrol
206 Airport Parkway, P.O. Box 9373
South Burlington, Vermont 05407-9373

MONTHLY SAFETY REPORT

Squadron: _____

Date: _____

Topic: _____

Description of training given:

This meeting was attended by: ☐ Cadets ☐ Seniors

Signature of Safety Officer

Date

SAFETY MEETING ATTENDEES

[illegible]

UNIT MONTHLY SAFETY REPORT

Month/Year: _____

Unit Charter Number: _____

I. Safety Meetings

- A. Number of squadron safety meetings (1 per month required): _____
- B. Length (minutes) of each meeting: _____
- C. Number of attendees: _____
- D. Topic(s) Briefed:
1. National Headquarters "Safety" Bulletin. []
 2. Ground: []
 3. Flying: []
 4. Other (state topics): _____ []
 5. Did you make a summary of the briefing available to those not present? [] Yes [] No
- E. Briefers:
1. Names: _____
 2. Organizations/Titles: _____
 3. Guests? [] Members? []

II. UNIT SAFETY BULLETIN BOARD

- A. Is there a conspicuous and timely unit safety bulletin board? [] Yes [] No
- B. Did you add/change any items this month? [] Yes [] No

III. SAFETY IMPROVEMENT/HAZARDS – Add CAPF 26, as appropriate.

IV. PILOT PROFICIENCY PROGRAM

- A. Do you promote the pilot proficiency program to unit pilots? [] Yes [] No
- B. Attach copies of pilot proficiency awards that pilots in your unit have earned. (Another copy goes to DOV.)

V. AWARDS (NLT 15 DEC)

Attach recommendations for Paul. W. Turner Award, Safety Officer of the Year, Safety Badges.

VI. SAFETY SURVEY (NLT 15 APR)

Attach an internal safety survey (1 required per year).

VII. REMARKS/REQUESTS

Signature of Safety Officer

Complete a report for each month of the year. Submit the reports each month or hold them until the end of each quarter. Deadlines are 15 April, 15 October and 15 January.